

C1 07800

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

FILL IN THIS FORM COMPLETELY PLEASE TYPE

COUNTY NUMBER

ST/CO USE ONLY

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE Received MM DD YY

09/11/2020

Approved 10/22/20

500 (TO NEAREST FOOT)

HO-20-0076

OWNER: Heritage Land Development; WELL SITE ADDRESS: Heritage Ridge Rd.; TOWN: Woodbine; SUBDIVISION: Linden Grove; SECTION: ; LOT: 32

WELL LOG Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for SOIL, BROWN SHALE, SOFT GRAY ROCK, MED GRAY ROCK, and storage: 675 gal.

GROUTING RECORD yes no

WELL HAS BEEN GROUTED (Y/N); TYPE OF GROUTING MATERIAL (CEMENT, BENTONITE CLAY); NO. OF BAGS; NO. OF POUNDS; GALLONS OF WATER; DEPTH OF GROUT SEAL

CASING RECORD

MAIN CASING TYPE (PL); Nominal diameter top (main) casing (6); Total depth of main casing (55)

OTHER CASING (if used) diameter and depth

SCREEN RECORD screen type or open hole (ST, BR, HO, PL, OT)

DEPTH (nearest ft.) HO 55 500

SLOT SIZE 1, 2, 3; DIAMETER OF SCREEN (NEAREST INCH)

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST

HOURS PUMPED (10); PUMPING RATE (3.33); METHOD USED TO MEASURE PUMPING RATE (Watch/Bucket); WATER LEVEL (40); BEFORE PUMPING (40); WHEN PUMPING (302); TYPE OF PUMP USED (S)

PUMP INSTALLED

DRILLER INSTALLED PUMP (YES/NO); TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O); CAPACITY: GALLONS PER MINUTE; PUMP HORSE POWER; PUMP COLUMN LENGTH; CASING HEIGHT

LATITUDE 3 9.32999; LONGITUDE 7 7.06074; (DEFAULT COORD. WGS 84)

NOTES:

B 1 68360 SEQUENCE NO. (MDE USE ONLY) **STATE OF MARYLAND** STATE PERMIT NUMBER
APPLICATION FOR PERMIT TO DRILL WELL HO - 20 - 0026
 please type 527894-H 70 fill in this form completely 79

OWNER INFORMATION
 Date Received (APA) 07/08/20
 8 MM DD YY 13
 Heritage Land Development
 15 Last Name Owner First Name 34
 PO BOX 482
 36 Street or RFD 55
 Lisbon Md 21765
 57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL
Howard
 8 COUNTY 21
Linden Grove
 23 SUBDIVISION 42
 SECTION 44 46 LOT 32 48 50
Hardline
 52 NEAREST TOWN 71

DRILLER INFORMATION
Michael Barlow M D 355
 76 Driller's Name License No. 81
Barlow Well Drilling
 Firm Name
522 Underwood Ln, Bel Air, Md 21014
 Address
[Signature] 7-1-2020
 Signature Date

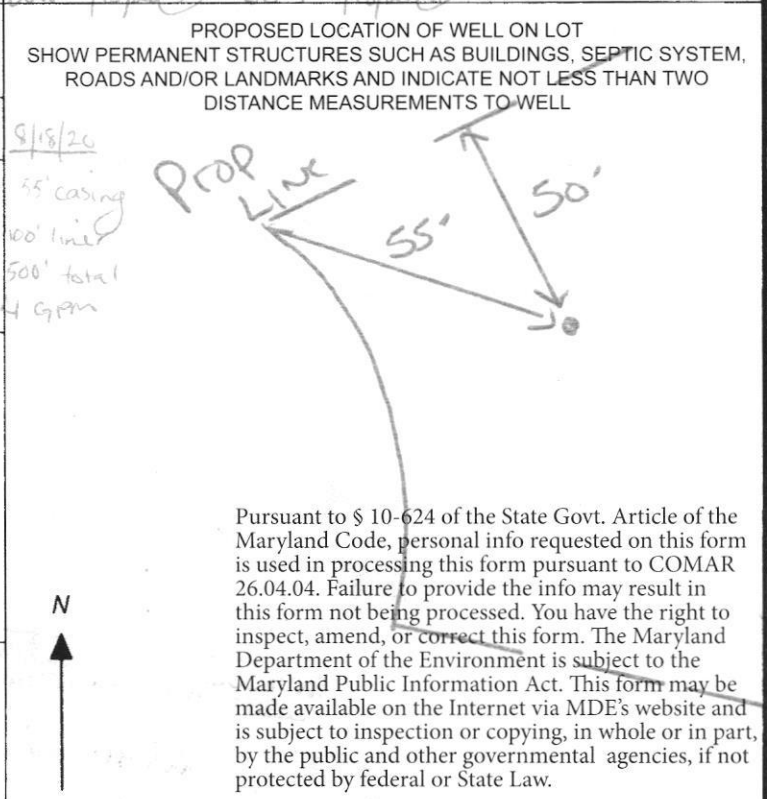
B 4 SOURCES OF DRILLING WATER
 1. Well
 2. 8/18/20
 3. cement
Heritage Ridge Rd
 11 STREET ADDRESS 30
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH
 WEST EAST
 SOUTH
 34 40 37
 DISTANCE FROM ROAD Ft
 ENTER FT OR MI 38 39
 TAX MAP: 8 BLK: 7 PARCEL 5

B 2 WELL INFORMATION
 APPROX. PUMPING RATE 5
 (GAL. PER MIN.) 8 12
 AVERAGE DAILY QUANTITY NEEDED 750
 (GAL. PER DAY) 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, DEWATERING
 PUBLIC WATER SUPPLY WELL
 TEST, OBSERVATION, MONITORING
 OPEN LOOP GEOTHERMAL
 CLOSED LOOP GEOTHERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard 13
 COUNTY NAME COUNTY NO.
 STATE SIGNATURE _____ INSERT S → 41
 DATE ISSUED 07/21/20 Dave Thomas 07/21/21
 43 MM DD YY 48 CO SIGNATURE EXP. DATE
 DON: 8/18/20 (S) DOG: 8/18/20 (S)

APPROXIMATE DEPTH OF WELL 300 FEET
 24 28
 APPROXIMATE DIAMETER OF WELL 6 INCH
 NEAREST INCH



METHOD OF DRILLING (circle one)
 BORED (or Augered) JETTED Jetted & DRIVEN
 30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)
 37 CABLE REverse-ROTary DRive-POINT
 other _____

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 THIS WELL WILL DEEPEM AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52

Not to be filled in by driller (MDE OR COUNTY USE ONLY)
 APPROP. PERMIT NUMBER HO 20 17 G0 02 (01)
 PERMIT No. HO - 20 - 0026
 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS
 NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

Pursuant to § 10-624 of the State Govt. Article of the Maryland Code, personal info requested on this form is used in processing this form pursuant to COMAR 26.04.04. Failure to provide the info may result in this form not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment is subject to the Maryland Public Information Act. This form may be made available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by federal or State Law.

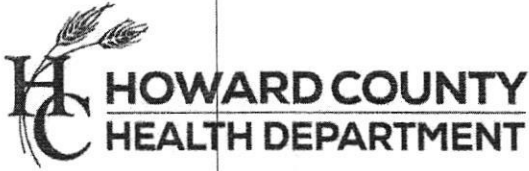


MICHAEL BARLOW WELL DRILLING & SERVICE, INC.
 522 Underwood Lane Bel Air, Maryland 21014
 (410) 838-6910 Fax (410) 838-3582

WELL YIELD REPORT

Date Test Completed:	September 11, 2020		
Well Depth:	500	feet	
Customer	Heritage Land Development	Permit #	HO-20-0026
Road	Heritage Ridge Road	Subdivision	Linden Grove
City	Woodbine	Section	
State	MD	Lot #	32

Time	Water Level feet Pump set at 350 feet	Time to Fill 1-gallon bucket seconds	G.P.M.
6:45 AM	40	4	15.00
7:00 AM	160	4	15.00
7:15 AM	280	6	10.00
7:30 AM	302	18	3.33
7:45 AM	302	18	3.33
8:00 AM	302	18	3.33
8:15 AM	303	18	3.33
8:30 AM	302	18	3.33
8:45 AM	302	18	3.33
9:00 AM	302	18	3.33
9:15 AM	302	18	3.33
9:30 AM	302	18	3.33
9:45 AM	302	18	3.33
10:00 AM	302	18	3.33
10:15 AM	302	18	3.33
10:30 AM	302	18	3.33
10:45 AM	302	18	3.33
11:00 AM	302	18	3.33
11:15 AM	302	18	3.33
11:30 AM	302	18	3.33
11:45 AM	302	18	3.33
12:00 PM	302	18	3.33
12:15 PM	302	18	3.33
12:30 PM	302	18	3.33
12:45 PM	302	18	3.33
1:00 PM	302	18	3.33
1:15 PM	302	18	3.33
1:30 PM	302	18	3.33
This yield test report is for informational purposes only. Please note the yield may increase or decrease over time and the GPM indicated above is not a guarantee.			



Bureau of Environmental Health
 8930 Stanford Blvd | Columbia, MD 21045
 410.313.2640 - Voice/Relay
 410.313.2648 - Fax
 1.866.313.6300 - Toll Free

Maura J. Rossman, M.D., Health Officer

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Fogle's Well Pump + Water Treatment, LLC Telephone #: 410-795-1535
 Address: P.O. Box 63
 Woodbine, Maryland 21797

Must circle one: Licensed Plumber / Licensed Well Driller / Licensed Well Pump Installer
 License # and name of individual responsible for the field installation:
 Name (Print): Dave C. Fogle License# MSD226

***A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.**

Name of Property Owner: Toll Brothers Telephone #: _____
 Subdivision: Linden Grove Lot #: 32 Well Tag #: HO-20-0026 ✓
 Site Address: 1444 Heritage Ridge Rd
Woodbine, MD 21797

Submersible Pump Data

Make: Sains
 Model #: SPS1042Z
 Pump Capacity: 3
 Well Yield: 3.3 gpm

Pitless Adapter

Make: Campbell
 Model#: N/A
 GPM Depth: 36" (36" min)
 GPM NSF/WSC approved: yes

Well Cap and Electric Conduit

Two piece watertight cap: yes
 Screened, vented well cap: yes
 Cap secured to casing: yes
 Conduit min 18" B.G.: yes
 Conduit secured to well cap: yes

Depth of well encountered at time of pump installation: 500 (feet)
 If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Must circle one: Torque arrestors / Cable guards / Other acceptable method used
Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing N/A

Piping to house

Type: 1" poly pipe
 PSI: 200 psi (160 psi min)
 Depth of supply line: 36" (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: yes
 Length of sleeve (5" minimum from foundation): 6'
 Sleeve sealed properly: yes

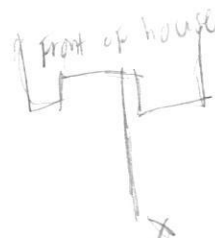
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: [Signature] Date: 11/2/2023

For Health Department Use Only – Not to be completed by Installer

Date Insp. Requested: 1/21/23 Date Insp. Approved: 1/3/23 Inspector: sp
 Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade ✓
 Two piece cap installed and attached to casing securely ✓
 Elec. conduit extends at least 18" below grade/attached to cap properly ✓
 Safety rope not outside of well cap/casing ✓
 Correct well tag attached properly and casing 8" above finished grade ✓
 Water supply line sleeved adequately at house connection ✓
 Adequate grout observed below pitless adapter ✓

(Revised form 10/24/2018)





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8930 Stanford Blvd | Columbia, MD 21045
410.313.2640 - Voice/Relay
410.313.2648 - Fax
1.866.313.6300 - Toll Free

Maura J. Rossman, M.D., Health Officer

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – AUGUST 22, 2023

February 22, 2023

Homeowner
1449 Heritage Ridge Road
Woodbine, MD 21797

**RE: Linden Grove, Lot 32
1449 Heritage Ridge Rd
Building Permit: B21003103
Well Permit: HO-20-0026**

Dear Homeowner:

This is to advise you that the septic system installation and water well construction for the above referenced property have been inspected and approved. Final approval of the septic system was granted on **12/16/2022**. Final approval of the well line connection to the dwelling was granted on **1/3/2023**. The well construction was completed on **10/22/2020**. Water samples were collected on **2/7/2023**.

The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit HO-20-0026. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

This Interim Certificate of Potability will expire **six months** from the date of issuance. Submission of a second bacteriological test indicating the water is free of coliform and fecal coliform bacteria is required prior to the expiration date, after which time a Final Certificate of Potability will be issued. **Failure to submit an additional sample and obtain a Final Certificate of Potability will result in a Notice of Violation and is punishable as a misdemeanor under the *Annotated Code of Maryland, Environment Article, 9-1311*, subject to a fine of up to \$500 or imprisonment not to exceed three months.**

Please contact (410) 313-1773 to schedule a final water sample appointment or contact a Maryland certified water laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website:
<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>



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Maura J. Rossman, M.D., Health Officer

In closing, please refer to our "[Homeowner Fact Sheet](#)" which illustrates a better understanding for your Onsite Sewage Disposal System. You will also find a link to Maryland Department of the Environments website which describes in further detail operation and maintenance of your septic system.

Approving Authority,

A handwritten signature in black ink, appearing to read 'Kevin M. Wolf', is written over a light blue horizontal line.

Kevin M. Wolf, LEHS, R.S./REHS, Supervisor
Groundwater Management Section
Well & Septic Program

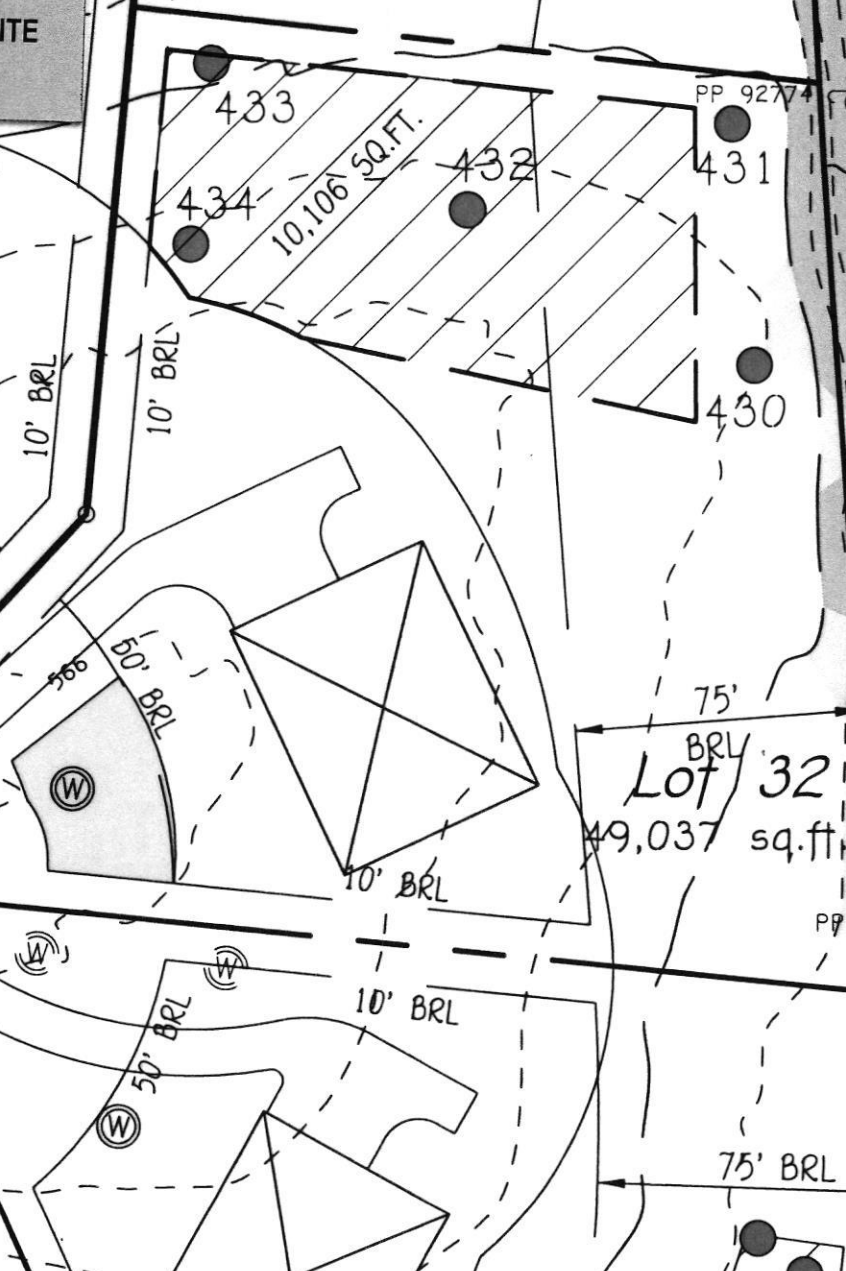
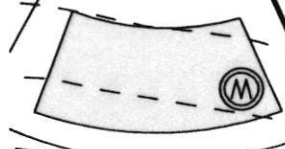
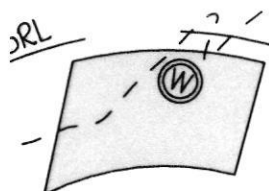
cc: Howard County Dept. of Inspections, Licenses, and Permits
Community Hygiene Program
File

DO NOT REMOVE THIS TAG
DEPARTMENT OF THE ENVIRONMENT
WELL PERMIT NUMBER

HO-20- 0026

INFORMATION - GIVE NUMBER AND WRITE
1800 WASHINGTON BLVD
BALTIMORE MARYLAND 21230

Linden Grove, Lot 32
Approved 7/21/20 (ST)
Staked by FCC



FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELLCOTT CITY, MARYLAND 21042
(410) 461 - 2855

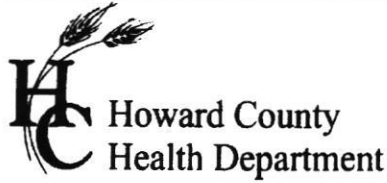


EXHIBIT TO ACCOMPANY WELL PERMIT

LOT 32
LINDEN GROVE
PHASE TWO

ZONED: RC-DEO

TAX MAP No. 8 GRID No. 7 PARCEL No. 5
HOWARD COUNTY, MARYLAND SCALE 1" = 50'
DATE: MAY 6, 2020



7178 Columbia Gateway Dr., Columbia, MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

TO ALL INTERESTED PARTIES

When submitting a well application for a proposed well for new construction, please indicate one of the following:

Well Site Location:

<u>Linden Grove</u>	<u>32</u>	<u>Heritage Ridge Rd.</u>
Subdivision/Property Name	Lot #	Road Name

- The well site has been staked by Fisher, Collins & Carter,
(professional land surveyor or company employing professional land surveyors)
on 06/16/20 (date) and does not require a site inspection.
- The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.

This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.

Maura J. Rossman, M.D., Health Officer

MEMORANDUM

TO: M. Barlow Well Drilling
522 Underwood Lane
Bel Air, MD 21014

FROM: Susan Thomas
Environmental Health Specialist
Howard County Health Department
Well & Septic Program

RE: Linden Grove Lots 24-37 & 39
Special Conditions for wells

DATE: July 21, 2020

The following comments apply to the above referenced Well Permit Applications. Please read through and complete as needed.

- A. The wells for the Linden Grove subdivision lots 24 thru 37 & 39 were staked with only one selected well site per the approved percolation certification plan signed 09/11/2018. If the well driller cannot confirm a successful well on this one well site, they will need to have the surveyor come back out and stake out the entire well box/alt well sites. This will need to be verified through the Health Department.
- B. Lots 26, 30 & 36 will require samples for Sodium, Chloride and TDS to be collected at the time of the Yield Test.

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554

REPORT OF ANALYSIS

Laboratory ID #: 157192 Account #: 1933
Reference: Linden Grove Lot 32 Client: Fogle's Well Pump & Treatment
Location: 1449 Heritage Ridge Road Requested By: Dave Fogle
Woodbine, MD 21747 Source: Well Water
Date/ Time Collected: 2/7/2023 0900 Site: Kitchen Sink
Date/Time Rec'd: 2/7/2023 1016 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 6.3
Collected By: J. Evans 0309JE Well #: HO-20-0026

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	2/8/2023 / 0805 / MEW
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	2/8/2023 / 0805 / MEW
Nitrate.	7.02	mg/L	10	EPA 300.0	2/7/2023 / 1324 / MEW
Turbidity	0.38	NTU	<10	SM2130B	2/7/2023 / 1205 / MEW
Sand	ND	mg/L	5	Visual/Gravimetric	2/7/2023 / 1215 / MEW

NOTES:

- 1 mg/L = milligrams per liter (also, parts per million)
- 2 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 3 NTU = Nephelometric Turbidity Units
- 4 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 5 Sample collected by client, analyzed as received
- 6 ND = None Detected
- 7 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 8 Visual well check: Sealed, vented cap

Reason for Test : Use & Occupancy

Building Permit # : 21003105

Date Reported: 2/8/2023